

## Blood-Stream Infection (CDC)

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**From:** Peace, Donna [Donna.Peace@choa.org]  
**Sent:** Monday, November 23, 2009 9:53 AM  
**To:** Blood-Stream Infection (CDC)  
**Subject:** Blood-Stream Infection (CDC) - Draft Guidelines for the Prevention of Intravascular Catheter-Related Infections

### Line 58, Page 2

**Please Change** “using a 2% chlorhexidine preparation for skin antisepsis□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis.□

### Line 62, Page 3

**Please Change** “and a 2% Chlorhexidine for skin antisepsis□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis.□

### Line 426, Page 19

**Please Change** “Prepare clean skin site with a 2% chlorhexidine-based preparation before central venous catheter insertion and during dressing changes□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis.□

### Line 627, Page 27

**Please Change** “and a 2% Chlorhexidine for skin antisepsis□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis.□

### Line 1436, Page 66

**Please Change** “Prepare clean skin site with a 2% chlorhexidine-based preparation before central venous catheter insertion and during dressing changes□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis prior to vascular access.□

### Line 1492, Page 69

**Please Change** “and a 2% Chlorhexidine preparation for skin antisepsis during CVC insertion□ to “use a greater than 0.5% alcoholic Chlorhexidine gluconate based preparation for skin antisepsis prior to catheter insertion.□

### Lines 1074 & 1075, Pg 48

Please consider explaining the CHG preference on inanimate objects.

4. Minimize contamination risk by wiping the access port with an appropriate antiseptic (chlorhexidine preferred) and accessing the port only with sterile devices [330, 333, 335]. Category IA

### Lines 1078 & 1079 Pg 48

Many Infection Preventionists healthcare facilities have conflicting BSI reduction results with valves vs. split septum’s. Please [provide clarification for usage of valves vs. split septum](#).

6. When needleless systems are used, the split septum valve is preferred over the mechanical valve due to increased risk of infection [336-339]. Category II

**Lines 1473- 1476 Pg 68**

Please consider delineating if this is age bracket of 2 months to either true gestational age or adjusted gestational age.

11. Use a chlorhexidine-impregnated sponge dressing for temporary short-term catheters in patients older than 2 months of age, if the CRBSI rate is higher than the institutional goal, despite adherence to basic CRBSI prevention measures, including education and training, use of chlorhexidine for skin antisepsis, and MSB [22, 156-158]. Category 1B

**Pg 68 line 1479**

Please consider addressing this to both the adult **and** pediatric population.

Use a 2% chlorhexidine wash daily to reduce CRBSI [162]. Category II

Thank you for the opportunity to comment. Thank you for the efforts to produce a comprehensive based CR-BSI reduction guideline.

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Infection Prevention is both **OBTAINABLE** and **EVERYONE's** responsibility.

**A 25% increase in hand hygiene compliance in**

**ICU's will reduce HA BSI's by 25%.**

*Please note that information contained in this email is considered Confidential Privileged Quality Peer Review Material Pursuant to GPR Statute Georgia, Code Sections 31-7-130 to 133*